ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:		
E-MAIL ADDRESS:		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
DIVAROTT RAIVIL.		
PETITION OF (Name):		
NOTICE OF HEARING ON PETITION FOR CHANGE OF	GENDER	CASE NUMBER:
AND ISSUANCE OF NEW BIRTH CERTIFICAT		
AND IOUGANGE OF NEW BIRTH GERTIFICATI	_	
	•	
NOTICE:		
1101102.		
1. Petitioner (name):		
a is a resident of this county.		
b. is an out-of-state resident who was born in California.		
2. Petitioner has filed a petition requesting an order for the issuance	of a new birth certificate	e reflecting the change of petitioner's
gender		
a. from male to female.		
b from female to male.		
3. THE COURT ORDERS that any person who can show good reason	on against the change of	of hirth certificate requested in the
petition may appear before this court at the hearing indicated below to file objections.		
petition may appear before this court at the rearing maleated below	iv to ilic objections.	
NOTICE OF LIEA		
NOTICE OF HEARING		
a. Date: Time:	Dept.:	Room:
. The cold area of the count in the control of the count in the control of the count in the control of the count in the co	1 -41 (
b. The address of the court is same as noted above	other (specify):	
4. Other orders (specify):		
T Other orders (specify).		
Date:		
		JUDICIAL OFFICER